PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/587074

| 1 201381014 | | | | | | | | | | |
|--|--|---|--|---|---|--------------------------|-------------------------|----|---------------------|------------------------|
| CLAIMS AS FILED - PART I | | | | | | SMALL ENT | SMALL ENTITY OTHER THAN | | | |
| U.S. NATIONAL STAGE FEES | | | (Column 1) | | (Column 2) | RATE | FEE | 1 | RATE | FEE |
| - | IC FEE | | SMALL ENT. = \$ 150 | | LARGE ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | |
| | | | Satisfies PCT Article 33(1)- | | All other situations = | | ···· | UK | | 300 |
| EXAMINATION FEE | | | (4) = \$50/\$100 · U.S. is ISA = \$50/\$100 | | \$ 100 / \$ 200 | EXAM. FEE | | | EXAM. FEE | 900 |
| SEARCH FEE | | | ALL other countries = \$ 200 / \$ 400 | | ALL other situations = \$ 250 / \$ 500 | SEARCH FEE | | | SEARCH FEE | CODY |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 35 min | us 20 = * | 15 | X \$ 25 = | | OR | X \$ 50 = | 750 |
| INDEPENDENT CLAIMS | | | / mi | nus 3 = * | - | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPENI | DENT CLAIM PRE | SENT | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 650 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | SMALL E | | | OTHER SMALL E | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | - | HIGHES NUMBEI PREVIOUS PAID FO | R PRESENT SLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | ÷ |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | | | | |
| | | (Column 1) | | (Column | -2) (Column-3)- | | | | | |
| 8 1, | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHES NUMBEI PREVIOUS PAID FO | T R PRESENT SLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| • | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. FFF | |
| | | | | | , | · | | | | |
| * ** | If the "Highest No If the "Highest No | umn 1 is less than th umber Previously Pa umber Previously Pa mber Previously Palo | id For" IN THIS SP Id For" IN THIS SP | ACE is less th | nan '20', enter "20". | l in the appropriate box | cin column 1 | | · | · |
| I | • | | | | | | | | | |